

CITY OF TUCSON

OFFICE OF THE CITY CLERK

CAMPAIGN FINANCE ADMINISTRATION REPORT RECEIPT



May Special Election – May 16, 2017 Primary Election – August 29, 2017 General Election – November 7, 2017 CITY OF TUCSON RECEIVED

17 JAN 26 P12:44 NAME OF COMMITTEE FILING REPORT OFFICE OF THE (Name of Political Committee) who is a candidate for the office (Name of Candidate, when applicable) Political Party ID # 09-160 - CT of 09-160-Ct X Political Committee Statement of Organization # M Amended Contract# (PMF Candidates Only) Request for Public Matching Funds **CAMPAIGN FINANCE REPORT:** Statement Establishing Eligibility - PMF Candidates Only a. Quarterly City/State Campaign Finance Report (Filed on or before January 15, 2017) SUNDAY b. Quarterly City/State Campaign Finance Report (Filed on or before April 15, 2017) SATURDAY c. May Pre-Election Report (Filed on or before May 6, 2017) **SATURDAY** d. Post-Election Report (Filed on or before July 15, 2017) **SATURDAY** City/State Pre – Primary Report (Filed on or before August 19, 2017) SATURDAY ☐ f. City Post – Primary Report (Filed on or before September 8, 2017) – PMF Candidates Only State Post – Primary Election Report (Filed on or before October 15, 2017) SUNDAY City/State Pre – General Election Report (Filed on or before October 28, 2017) SATURDAY City Post – General Election Report (Filed on or before November 17, 2017) – PMF Candidates Only State Post – General Election Report (Filed on or before January 15, 2018) □ i. □ k. Termination Statement (Filed on or before March 13, 2018) – PMF Candidates Only must include Final report if not previously filed Other

Signature Deputy City Clerk

Date:

19138 Z 01/23/17



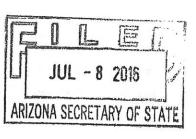
☐ Initial Registration

M Amended Statement

☐ Out of State Committee







☐ Standing Political Committee Titles 16 & 19, Arizona Revised Statutes Definitions, statutory references and important information on page 2.					COMMITTEE ID NUMBER 201000223	
NAME OF POLITICAL COMMITTEE (For ballot measure committee, name shall include official petition serial number) LAS ADELITAS ARIZONA PAC					DATE 01/30/2016	
TYPE OF COMMITTEE SUPPORT/OPPOSE (CANDIDATE)	BALL	BALLOT MEASURE ☐ SUPPORT ☐ OPPOSE				
COMMITTEE ADDRESS P.O. BOX 27716	CITY	CITY		ZIP 85726		
COMMITTEE MAILING ADDRESS (if different PO BOX 27716		CITY TUCSON		ZIP 85726		
COMMITTEE TELEPHONE # (520) 249-4467	COMMITTEE FAX#		COMMITTEE EMAIL ADD			
NAME OF SPONSORING ORGANIZATION (if applicable)			TYPE OF ORGANIZATION			
ADDRESS OF SPONSORING ORGANIZATIO	RELA	RELATIONSHIP TO POLITICAL COMMITTEE				
EACH POLITICAL COMMITTEE SHALL HAV SINGLE POLITICAL COMMITTEE MAY NOT TREASURER OF HIS OR HER OWN CAMPA	BE HELD BY THE SAME IND	IVIDUAL, EXCEPT T	ON OF CHAIRN HAT A CANDII	MAN AND TREAS DATE MAY BE C	URER OF A HAIRMAN AND	
NAME OF COMMITTEE CHAIRMAN MICHELLE AGUILERA		CHAIRMAN'S TELEPHONE # (520) 249-4467		CHAIRMAN'S FAX#		
CHAIRMAN'S ADDRESS PO BOX 27716		CITY		STATE AZ	ZIP 85726	
CHAIRMAN'S OCCUPATION GRADUATE STUDENT	CHAIRMAN'S EMPLOYE UNIVERSITY OF ARIZON			I'S EMAIL ADDRESS TASARIZONA@GMAIL.COM		
NAME OF COMMITTEE TREASURER MANUEL GUZMAN		TREASURER'S TELEPHONE # (520) 241-6611		TREASURER'S FAX#		
TREASURER'S ADDRESS 2218 S SAN JOSE DR		CITY TUCSON		STATE AZ	ZIP 85713	
TREASURER'S OCCUPATION PROGRAM DIRECTOR	TREASURER'S EMPLOY				S EMAIL ADDRESS ASARIZONAPAC@GMAIL.COM	
LIST THE NAMES OF ALL FINANCIAL INST (Do not list account numbers.)	ITUTIONS WITH WHICH THE C	COMMITTEE MAINTA	A INS ACCOUN	ITS OR SAFETY	DEPOSIT BOXES.	
1. WELLS FARGO BANK	2.	2. 3.				
FOR A CANDIDATE'S CAMPAIGN COMMITT (For Exploi	TEE OR AN EXPLORATORY Coratory Committees party affilia				TION:	
NAME OF CANDIDATE OR DESIGNATING IN	IDIVIDUAL ("DI")		C	P ECTION CYC		
CANDIDATE OR D/I'S TELEPHONE #	CANDIDATE OR D/I'S FA	AX#	COUNTY	COUNTY OF RESIDENCE CO		
CANDIDATE OR D/I'S ADDRESS		CITY	E	STATE	ZIPES	
CANDIDATE OR D/I'S EMAIL ADDRESS	PARTY AFFILIATION		OFFICE S	7.7		

Committee ID: 201000223

Date:

01/30/2016

Form ID:

0000350774



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YOUR APPLICATION IS NOT COMPLETE WITHOUT THE REQUIRED SIGNATURES BELOW: JAN 26 P12:42 BOX 1 All committees require the signature of both the chairman and treasurer. Standing Committees, see BOX 3 below. CHAIRMAN'S AND TREASURER'S STATEMENT: We, the undersigned chairman and treasurer, have read all of the applicable laws relat ing to campaign finance and reporting and have examined the information contained in this statement of organization and, to the best tof our FIHE knowledge and belief, it is true, correct and complete. Date: Chairman's signature: Date: Treasurer's signature: BOX 2 Complete and sign this additional box only if the committee is a candidate's campaign committee or exploratory committee. DESIGNATING INDIVIDUAL OR CANDIDATE'S STATEMENT: I authorize the above -named political committee as my political committee to receive contributions and make expenditures on my behalf. D/l's or Candidate's signature: Date: Complete and notarize this box only if the committee has been in existence for more than one year and is filing for Standing Committee status. **BOX 3** STANDING POLITICAL COMMITTEE'S STATEMENT (if applicable) (A.R.S. §16 -902.01): I/we hereby declare the status of this political committee as a standing political committee. Date: Chairman's signature: Date: Treasurer's signature: State of Arizona State of Arizona County of County of SUBSCRIBED AND SWORN TO before me this SUBSCRIBED AND SWORN TO before me this My Commission Expires: My Commission Expires: **Notary Public Notary Public**

